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UTILITY PATENT APPLICATION TRANSMITTAL

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Attomey	Docket No.	740145-180	S	
First Inv	entor	Takeshi MINOBE et al.	5 U	
Title		OW FAN FOR DISCHARGE GAS LASER	296	

(Only for new nonprovisional applications under 37 CFR 1.53(b))				Expr	ess Mail Label No.			1	''		
APPLICATION ELEMENTS					=:			ommi	ssioner for Patents		
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See MPEP chapter 600 concerning utility patent application contents.						7. ☐ CD-ROM					
1. E Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing)							or CD-K in a Program (Ap				
2. 🗆		ns small entity stat				8. Nucleotide an	d/or Amino A	cid Se	equence Submission		
	See 37 CFR 1.					(if applicable,	all necessary)			
3. X	Specification		ages 15]			a. Computer Readable Form (CRF)					
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		to sequence listing			1	c. Statements verifying identity of above copies ACCOMPANYING APPLICATION PARTS					
		iter program listing id of the Invention	gappendix			ACCOM	PANYING A	PPLI	CATION PARTS		
		mary of the Inventi	on			9. 🗷 Assignm	nent Papers (c	over sł	heet & document(s))		
	- Brief Desc	ription of the Draw				10. 🛘 37 CFR			☐ Power of		
	 Detailed D 	escription	•				iere is an assig		Attorney		
	- Claim(s)	f the Disclosure	,						ent (if applicable)		
4. X	Drawing(s) (3.5		f Total Sheets 9	7		12. 🗷 Informat			Copies of	IDS	
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		TION OF INVEN	-	,		15. Certified Copy of Priority Document(s) (if foreign priority is claimed)					
	Signed	statement attached	d deleting invent			16. ☐ Request and Certification under 35 U.S.C. 122					
		in the prior applic	ation, see 37 CF	R		(b)(2)(B)(I). Applicant must attach form PTO/SB/35					
. E)(2) and 1.33(b)	NED 1.76			•	uivalent.				
6. E	Application Da	ata Sheet. See 37 C	JFK 1.70			17. Other:					
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January 18, 2001

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Application Number	New Application	O E
Filing Date	January 18, 2001	
First Named Inventor	Takeshi MINOBE et al.	s. 919
Examiner Name	Unknown	9
Group Art Unit	Unknown	960
Attorney Docket No.	740145-180	Ť =

METHOD OF PAYMENT				FEE CALCULATION (continued)						
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103 18	203		aims in excess of 20		169	900	169	900	Request for expedited examination of a design	
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**or number previously paid, if greater; For Reissues, see above				<u> </u>						
SUBMITTED BY							Complete (if applicable)			
Name (Print/T)	vpe)	David	Sy Safran	00		stration rnev/A		27	,997 Telephone 703-790-	9110

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